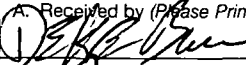
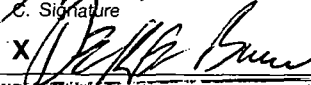


SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		A. Received by (Please Print Clearly)  B. Date of Delivery OCT 17 2003	
1. Article Addressed to: Ingersoll-Rand Attn: Donna McMahon 200 Chestnut Ridge Road Woodcliff Lake, NJ 07677 (re: Clark Equipment)		C. Signature  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:	
		3. Service/Type <input checked="" type="checkbox"/> Certified-Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7001 0320 0006 0294 2714	
PS Form 3811, March 2001		Domestic Return Receipt	
		102595-01-M-1424	

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
OFFICIAL USE	
Postage \$	1.98
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	6.03
Sent To	Ingersoll-Rand Attn: Donna McMahon 200 Chestnut Ridge Road Woodcliff Lake, NJ 07677 (re: Clark Equipment)
Street, Apt. No., or PO Box No.	
City, State, ZIP	
PS Form 3800-20	

7001 0320 0006 0294 2714

CHICAGO IL LOOP STA
OCT 10 2003
Postmark Here
USPO

D. Sheppard
SR-6J(CRS)

